Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 1 of 69

| Fill in this information to identify your case: | |
|---|---|
| United States Bankruptcy Court for the: Northern District of: Illinois | |
| (State) Case number (if known) | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Glenisha | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's | Owens | |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | | |
| | | Last name | Last name |
| | | First name | First name |
| | | i ii st riane | Histiliane |
| | | Middle name | Middle name |
| | | | |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 9837 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 2 of 69

| Debtor 1 Glenisha First Name | Owens Middle Name Last Name | Case number (if known) |
|--|---|--|
| | | |
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| Identification Numbers (EIN) you have used in the last | Business name | Business name |
| 8 years | Business name | Business name |
| Include trade names and doing business as names | EIN | EIN |
| | EIN | EIN |
| 5. Where you live | 10010 5 | If Debtor 2 lives at a different address: |
| | 16342 Evans Ave Number Street | Number Street |
| | South Holland Illinois 60473 City State Zip Code | City State Zip Code |
| | Cook Zip Code | City State Zip Code |
| | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | Number Street | Number Street |
| | | |
| | City State Zip Code | City State Zip Code |
| 6. Why you are choosing this district | Check one: | Check one: |
| to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | |
| | | |
| | | |
| | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 3 of 69

| De | ebtor 1 Glenisha | | | Case number (if kno | wn) |
|-----|---|--|--|--|--|
| | First Name | Middle Name | Last Name | | |
| Pa | rt 2: Tell the Court Abo | ut Your Bankruptcy Case | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief descripting Bankruptcy (Form B2010)). Also, Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | . <i>§ 342(b) for Individuals Filing for</i> priate box. |
| 8. | How you will pay the fee | more details about how yo cashier's check, or money may pay with a credit card I need to pay the fee in in Individuals to Pay Your Fit I request that my fee be you judge may, but is not requite the official poverty line that | ou may pay. Typically, if you order. If your attorney is so or check with a pre-printer astallments. If you choose ding Fee in Installments (Owaived (You may request part of the Applie ou must fill out the Application of t | ou are paying the submitting your ped address. e this option, sign official Form 103, this option only and may do so only tize and you are u | the clerk's office in your local court for efee yourself, you may pay with cash, payment on your behalf, your attorney on and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. | Do you rent your residence? | ✓ No. Go to line 12. Yes. Has your landlord obta ✓ No. Go to line 12. Yes. Fill out <i>Initial S</i> this bankrupt | Statement About an Eviction | | <i>t You</i> (Form 101A) and file it with |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 4 of 69

Owens Debtor 1 Glenisha __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 5 of 69

Debtor 1 Glenisha Owens Case number (if known)
First Name Middle Name Last Name

| Pa | rt 5: Explain Your Effor | rts to Receive a Brie | fing About Credit Counseling | | | | |
|--|--|---|--|----|---|--|--|
| | | About Debtor 1: | | Al | bout Debtor 2 (Sp | oouse Only in a Joint Case): | |
| 15. | Tell the court | You must check one: | | Yo | ou must check one: | | |
| | whether you have received briefing about credit counseling. | counseling agen | ing from an approved credit cy within the 180 days before I ptcy petition, and I received a npletion. | | counseling ager | ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion. | |
| | The law requires that you receive a briefing | | he certificate and the payment plan, veloped with the agency. | | | he certificate and the payment plan, veloped with the agency. | |
| about credit counseling b file for bankry You must tru check one of following cho you cannot c | counseling before you file for bankruptcy. You must truthfully | counseling agen | ing from an approved credit cy within the 180 days before I ptcy petition, but I do not have a npletion. | | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. | | |
| | check one of the following choices. If you cannot do so, you are not eligible to file. | | er you file this bankruptcy petition, opy of the certificate and payment | | | er you file this bankruptcy petition, opy of the certificate and payment | |
| If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. | | from an approve obtain those ser made my reques | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. | | | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the | |
| | | requirement, attac efforts you made t unable to obtain it | ask for a 30-day temporary waiver of the quirement, attach a separate sheet explaining what orts you made to obtain the briefing, why you were able to obtain it before you filed for bankruptcy, and at exigent circumstances required you to file this se. | | requirement, attace efforts you made unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this | |
| | | with your reasons | our case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before ou filed for bankruptcy. | | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. | | |
| | | receive a briefing must file a certifica with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | | receive a briefing must file a certification with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | |
| | | | of the 30-day deadline is granted only is limited to a maximum of 15 days. | | | he 30-day deadline is granted only mited to a maximum of 15 days. | |
| | | I am not required counseling beca | d to receive a briefing about credit use of: | | I am not required counseling beca | d to receive a briefing about credit ause of: | |
| | | ☐ Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | |
| | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | |
| | | Active duty. | I am currently on active military duty in a military combat zone. | | Active duty. | I am currently on active military duty in a military combat zone. | |
| | | about credit coun | are not required to receive a briefing seling, you must file a motion for punseling with the court. | | about credit cour | are not required to receive a briefing seling, you must file a motion for ounseling with the court. | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 6 of 69

| Debtor 1 Glenisha | Ower | | mber (if known) | | | |
|--|---|---|---|--|--|--|
| First Name | Middle Name Last N | ame | | | | |
| Part 6: Answer These Qu | estions for Reporting Purposes | oumer debte? Canaumar | dahta ara dafinad in 11 LLS C | \$ \$ 101(9) ap | | |
| 16. What kind of debts do you have? | debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative | ✓ No. I am not filing under Chapter Yes. I am filing under Chapter 7. Description of the expenses are paid that funds No. | | | d administrative | | |
| expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. | | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,0 50,001-100 More than 1 | ,000 | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mill \$10,000,001-\$50 m \$50,000,001-\$100 r \$100,000,001-\$500 | illion | 01-\$1 billion 001-\$10 billion 0,001-\$50 billion 50 billion | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 mill \$10,000,001-\$50 m \$50,000,001-\$100 r \$100,000,001-\$500 | illion | 01-\$1 billion 001-\$10 billion 0,001-\$50 billion 50 billion | | |
| Part 7: Sign Below | | | | | | |
| For you | I have examined this petition, and I correct. If I have chosen to file under Chapt of title 11, United States Code. I ununder Chapter 7. | er 7, I am aware that I may pure and the relief available | proceed, if eligible, under Cha e under each chapter, and I ch | apter 7, 11,12, or 13 noose to proceed | | |
| | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| | /s/ Glenisha Owens Signature of Debtor 1 | × | Signature of Debtor 2 | | | |
| | Executed on 2/7/2018 MM / DD / Y | <u></u> | Executed on | /// | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 7 of 69

| Debtor 1 Glenisha | | Owens | Case number (if k | known) |
|--|----------------------------|--------------------------|---------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12, c | or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | ired by 11 U.S.C. § 34 | 2(b) and, in a case in w | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the inf | ormation in the sched | ules filed with the petition is incorrect. |
| attorney, you do not | • | , , | | • |
| need to file this page. | /s/ Alicia Haro | | Date | 2/7/2018 |
| | Signature of Attorney for | or Debtor | M | M / DD / YYYY |
| | g | | | |
| | | | | |
| | Alicia Haro | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Aver | nue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | | Email address | aharo@semradlaw.com |
| | | | | |
| | | | Illinois | |
| | Bar number | | State | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 8 of 69

| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|
| Debtor 1 | Glenisha | Owens | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number (If known) | - | | (State) | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filii | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | · |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$7,310.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$7,310.00 |
| art 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$12,415.00 |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$36,737.00 |
| Your total liabilities | \$49,152.00 |
| Part 3: Summarize Your Income and Expenses | |
| atto. Cummunze rour moome and expenses | |
| . Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,291.73 |
| , | |
| . Schedule J: Your Expenses (Official Form 106J) | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 9 of 69

| Deb | tor 1 | Glenisha | | Owens | Case number (if known) | | | | | | |
|-------------|---|---|---------------------------|--|--|----------|--|--|--|--|--|
| | | First Name | Middle Name | Last Name | _ | | | | | | |
| Part | 4: | Answer These Question | ns for Administrativ | ve and Statistical Recor | ds | | | | | | |
| 6. A | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | | |
| г | _ N | o. You have nothing to report | t on this part of the for | m. Check this box and submit | t this form to the court with your other sch | edules | | | | | |
| L | - | · . | t on the part of the for | The Strock and Box and Gashin | t and form to and doubt with your outlon con | oddioo. | | | | | |
| Ŀ | ✓ Ye | es. | | | | | | | | | |
| 7. W | /hat l | kind of debt do you have? | | | | | | | | | |
| Ī, | 万 Y⋅ | our debts are primarily con | sumer debts. Consum | ner debts are those incurred b | y an individual primarily for a personal, | | | | | | |
| | fa | mily, or household purpose. | 11 U.S.C. § 101(8). Fil | l out lines 8-10 for statistical p | ourposes. 28 U.S.C. § 159. | | | | | | |
| | | our debts are not primarily is form to the court with you | | ı have nothing to report on th | is part of the form. Check this box and sub | omit | | | | | |
| | | | | _ | | | | | | | |
| | | the Statement of Your Cur 122A-1 Line 11; OR , Form 1 | | : Copy your total current mon m 122C-1 Line 14. | thly income from Official | \$319.22 | | | | | |
| 9. | Сор | y the following special cate | egories of claims fron | n Part 4, line 6 of Schedule | E/F: | | | | | | |
| | From | n Part 4 on Schedule E/F, o | copy the following: | | Total claim | | | | | | |
| | | iii ait 4 oii ooneddie 271, t | opy the following. | | rotar dami | | | | | | |
| | 9a. I | Domestic support obligations | (Copy line 6a.) | | \$0.00 | | | | | | |
| | ٥. | 9b. Taxes and certain other debts you owe the governmen | | ant (Convilled Ch.) | \$0.00 | | | | | | |
| | 90. | | | ent. (Copy line 6b.) | <u>.</u> | | | | | | |
| | 9c. (| Claims for death or personal i | njury while you were in | toxicated. (Copy line 6c.) | \$0.00 | | | | | | |
| | 9d. | Student loans. (Copy line 6f.) | | | \$16,770.00 | | | | | | |
| | 90. (| 9e. Obligations arising out of a separation agreement or di | | divorce that you did not report | \$0.00 | | | | | | |
| | | rity claims. (Copy line 6g.) | paradon agreement or | aivoroc inat you did not repor | | | | | | | |
| | 01.5 | Nahita da assas da assas assas esta de | decided and all | in the debte (Occupies 21.) | \$0.00 | | | | | | |
| | 91. L | Debts to pension or profit-sha | iring plans, and other s | imilar debts. (Copy line 6h.) | | | | | | | |

\$16,770.00

9g. Total. Add lines 9a through 9f.

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 10 of 69

| | | | | | | _ | | |
|--|--|---|--|----------------------------------|--|-------------------------|---|--|
| Fill in this | information | to identify your o | ase: | | | | | |
| Debtor 1 | Gleni | | | | Owens | | | |
| | First I | Name | Middle N | lame | Last Name | | | |
| Debtor 2 (Spouse, if fi | ling) First I | Name | Middle N | lame | Last Name | | | |
| United Sta | ates Bankrup | otcy Court for the: | Northern | | District of Illinois (State) | | | |
| Case num | nber | | | | (State) | | | |
| Officia | al Form | 106A/B | | | | | | Check if this is an amended filing |
| Sche | dule A | /B: Prope | erty | | | | | 12/ |
| category vresponsib write your Part 1: | where you t le for supply name and Describe | hink it fits best. ying correct info case number (if l Each Residend | Be as complete a mation. If more s known). Answer e ce, Building, Lai | nd ac pace very c nd, o | r Other Real Estate You Own or | eople are to this fo | e filing together, both a orm. On the top of any a an Interest In | re equally |
| _ | No. Go to F | | quitable interest | ın any | residence, building, land, or simila | r propert | y? | |
| | | | | | | | | |
| 1.1 | | is the property? | other description | | at is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | y. | the amount of any secu | claims or exemptions. Put ared claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| | | | | | Land | | | |
| | Number | Street | | H | Investment property Timeshare | | Describe the nature of interest (such as fee sthe entireties, or a life | simple, tenancy by |
| | City | State | Zip Code | | Other | | | e estate), ii kilowii. |
| | | | | one. | o has an interest in the property? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | Check if this is co (see instructions) | mmunity property |
| | | | | Oth | er information you wish to add abou | ıt this ite | m, such as local | |
| | | | | | perty identification number: | | | |
| If you | | e more than one, I | | | at is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | y. | the amount of any secu | claims or exemptions. Put red claims on Schedule D: nims Secured by Property. Current value of the portion you own? |
| | Number | Street | | | Land Investment property | | Describe the nature o | |
| | City | State | Zip Code | Ħ | Timeshare Other | | interest (such as fee s the entireties, or a life | |
| | | | | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | r | (see instructions) | mmunity property |

property identification number:

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 11 of 69

| Debtor 1 | Glenisha First Name | Middle Name | Owens Last Name | Case number | (if known) | |
|----------|---|--|---|---------------------|--|---|
| 1.3 | eet address, if available, or ot | v | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| Nu | mber Street / State | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | [] [] [] [] | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an other information you wish to add | other | Check if this is co (see instructions) | mmunity property |
| | I the dollar value of the po ave attached for Part 1. Wi | rtion you own for a rite that number he | . | uding any entries | for pages | |
| | Describe Your Vehicle | | in any vehicles, whether they are | registered or no | t? Include any vehicles | |
| • | ans, trucks, tractors, sport ut | | also report it on Schedule G: Executo cycles | ory Contracts and l | Jnexpired Leases. | |
| 3.1 | Model: Year: | Ford Escape 2010 | Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2010 Ford Escape | 123000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community | | Current value of the entire property? \$7000.00 | Current value of the portion you own? \$7000.00 |
| 3.2 | Make Model: Year: | | who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community | | Current value of the entire property? | Current value of the portion you own? |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 12 of 69

| otor 1 | Glenisha First Name | Middle Name | Owens Last Name | Case numbe | er (it known) | |
|--------|---|-------------------------|--|---|--|---|
| | | Middle Name | | | | |
| 3.3 | Make Model: | | Who has an interest in the pone. | property? Check | | claims or exemptions. Pured claims on <i>Schedule</i> in |
| | Year: | | Debtor 1 only | | | nims Secured by Property |
| | Approximate mileage: | | | | | |
| | | · | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 on | ly | entire property? | portion you own? |
| | | | At least one of the debtors | and another | · · | |
| | | | Check if this is commun | ity property (see | | |
| | | | instructions) | | | |
| 3.4 | Make | | Who has an interest in the p | property? Check | Do not deduct secured | claims or exemptions. Pu |
| | Model: | | one. | | | red claims on Schedule |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | nims Secured by Property |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 on | ly | entire property? | portion you own? |
| | | | At least one of the debtors | and another | | |
| | | | Check if this is commun | ity property (see | | |
| | | | instructions) | ity proporty (occ | | |
| Exar | nples: Boats, trailers, motors No | • | er recreational vehicles, other , fishing vessels, snowmobiles, n | • | | |
| Exar | nples: Boats, trailers, motors No Yes | • | | notorcycle accessori | Do not deduct secured | claims or exemptions. Pured claims on <i>Schedule</i> in |
| Exar | nples: Boats, trailers, motors No Yes Make | • | , fishing vessels, snowmobiles, n Who has an interest in the p | notorcycle accessori | Do not deduct secured the amount of any secu | • |
| Exar | nples: Boats, trailers, motors No Yes Make Model: | • | who has an interest in the pone. Debtor 1 only | notorcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule I |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only | notorcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> i |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl | notorcycle accessori property? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule and ims Secured by Property. Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors | notorcycle accessori oroperty? Check ly s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule and ims Secured by Property. Current value of the |
| Exar | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl | notorcycle accessori oroperty? Check ly s and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule and ims Secured by Property. Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is communinstructions) | property? Check ly s and another lity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule a nims Secured by Property. Current value of the portion you own? |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | • | who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is commun | property? Check ly s and another lity property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | red claims on Schedule aims Secured by Property Current value of the portion you own? claims or exemptions. Pu |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is commun instructions) Who has an interest in the p | property? Check ly s and another lity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | claims on Schedule aims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule aims on Schedule |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is commun instructions) Who has an interest in the pone. | property? Check ly s and another lity property (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule and secured by Property. Current value of the portion you own? claims or exemptions. Pured claims on Schedule and secured by Property. |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is commun instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only | oroperty? Check ly s and another hity property (see | Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule and ims Secured by Property. Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only At least one of the debtors Check if this is commun instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | oroperty? Check ly s and another hity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims on Schedule anims Secured by Property. |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is commun instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors one. At least one of the debtors one. At least one of the debtors only At least one of the debtors | property? Check ly s and another sity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims on Schedule anims Secured by Property. |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | • | Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 onl At least one of the debtors Check if this is commun instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors At least one of the debtors Check if this is commun | property? Check ly s and another sity property (see property? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims or exemptions. Puried claims on Schedule anims Secured by Property. |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | s, personal watercraft, | Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is commun instructions) Who has an interest in the pone. Debtor 1 only Debtor 2 only At least one of the debtors one. At least one of the debtors one. At least one of the debtors only At least one of the debtors | property? Check ly s and another hity property (see property? Check ly s and another hity property (see | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? | claims or exemptions. Pured claims or exemptions. Pured claims or exemptions. Pured claims or exemptions. Pured claims on Schedule aims Secured by Property. |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 13 of 69

Debtor 1 Glenisha Owens Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe... 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Cell Phone \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$200.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$300.00 for Part 3. Write that number here

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 14 of 69

Debtor 1 Glenisha Owens Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$10.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 15 of 69

| Debt | tor 1 Glenisha | | Owens | Case number (if known) | |
|------|--|--|----------------------------|---|------------|
| | First Name | Middle Name | Last Name | · · · · <u></u> | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer Issuer name: | checks, promissory no | ites, and money orders. | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in If | | . thrift savings accounts | s, or other pension or profit-sharing plans | |
| | No No | " " = " " " " " " " " " " " " " " " " " | , anni caringo account | s, or other policies or prom onaling plane | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | | | |
| | | | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | _ | | |
| | | Water: | | | |
| | | Rented furniture: | | | . <u> </u> |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 16 of 69

| Debt | or 1 Glenisha First Name | NA: alalla | Owens Name Last Name | Case number (if known) | |
|------|--|--|--|---|--|
| 24. | Interests in a | n education IRA, in an ac | count in a qualified ABLE progr | ram, or under a qualified state tuition program. | |
| | N | 530(b)(1), 529A(b), and 529 | 9(b)(1). | | |
| | ✓ No Yes | Institution name and descr | iption. Separately file the records of | of any interests.11 U.S.C. § 521(c): | |
| | | | | | |
| | | | | | |
| 25. | | able or future interests in or your benefit | property (other than anything l | isted in line 1), and rights or powers | |
| | ✓ No | | | | 1 |
| | Yes. Desc | ribe | | | |
| 26. | Patents, cop | yrights, trademarks, trade | secrets, and other intellectua | l property | |
| | | ernet domain names, websit | tes, proceeds from royalties and lie | censing agreements | |
| | ✓ No Yes. Desc | cribe | | | |
| | | | | | |
| 27. | | nchises, and other genera | _ | lings, liquor licenses, professional licenses | |
| | √ No | 3 1 1 1 1 1 1 1 1 1 | | 3., 4 | |
| | Yes. Desc | ribe | | | |
| | | | | | |
| | | | | | |
| Mor | ney or prope | rty owed to you? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or prope | | | | portion you own? |
| | Tax refunds o | wed to you | | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give about | wed to you specific information It them, including whether | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give about | wed to you specific information | | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and the support | wed to you specific information t them, including whether already filed the returns the tax years | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and and and are supported. Family supported Examples: Pass | wed to you specific information t them, including whether already filed the returns the tax years | spousal support, child support, r | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and the support of the sup | wed to you specific information t them, including whether already filed the returns the tax years | spousal support, child support, r | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and the support of the sup | wed to you specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, | spousal support, child support, r | State: Local: naintenance, divorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and the support of the sup | wed to you specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, | spousal support, child support, r | State: Local: naintenance, divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and the support of the sup | wed to you specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, | spousal support, child support, r | State: Local: naintenance, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and | wed to you specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, specific information | spousal support, child support, r | State: Local: Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give about you and | specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, specific information | | State: Local: naintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| 28. | Tax refunds or No Yes. Give about you and | specific information It them, including whether already filed the returns the tax years t t due or lump sum alimony, specific information | nce payments, disability benefits, s | State: Local: naintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| 28. | Tax refunds or No Yes. Give about you and | specific information It them, including whether already filed the returns the tax years It It due or lump sum alimony, specific information | nce payments, disability benefits, s | State: Local: naintenance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 17 of 69

| Deb ¹ | tor 1 Glenisha | Owens | Case number (if known) | |
|------------------|--|--|---|---|
| | First Name Mid | ddle Name Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insura | ance; health savings account (HSA); credi | it, homeowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due y If you are the beneficiary of a living trust property because someone has died. | rou from someone who has died r, expect proceeds from a life insurance po | olicy, or are currently entitled to receive | |
| | ✓ No Yes. Describe | | | |
| 33. | Claims against third parties, whether Examples: Accidents, employment dispu | - | de a demand for payment | |
| | No Yes. Describe | | | |
| 34. | Other contingent and unliquidated c to set off claims | laims of every nature, including count | terclaims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not alrea | ady list | | |
| | ✓ No Yes. Describe | | | |
| 36. | Add the dollar value of all of your ent for Part 4. Write that number here | tries from Part 4, including any entries | | \$10.00 |
| Dort | Con Describe Any Rusiness Rela | tod Droporty Vou Own or Hove o | n Interest In List any real estate in Port 1 | |
| Part | _ | | n Interest In. List any real estate in Part 1 | • |
| 37. | υο you own or nave any legal or equi | itable interest in any business-related | | rront volue of the |
| | No. Go to Part 6. Yes. Go to line 38. | | por Do | rrent value of the tion you own? not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions | s you already earned | | · |
| | No Yes. Describe | | | |
| 39. | Office equipment, furnishings, and su Examples: Business-related computers, | | machines, rugs, telephones, desks, chairs, electron | nic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 18 of 69

| Debt | tor 1 Glenisha | Owens | Case number (if known) | |
|--------------|--|---|----------------------------------|------------------------------|
| | First Name Middle Nam | e Last Name | | |
| 40. | Machinery, fixtures, equipment, supplies yo | u use in business, and tools of your | trade | |
| | No | | | |
| | | | | |
| | Yes. Describe | | | |
| | | | | |
| 41 | Inventory | | | |
| 41. | inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |
| 42. | Interests in partnerships or joint ventures | | | |
| | ✓ No | | | |
| | | Name of entity: | % of ownership: | |
| | Yes. Give specific information about | | | |
| | them | | | _ |
| | | | | |
| | | | | |
| | | | | |
| 43. (| Customer lists, mailing lists, or other compil | ations | | |
| | ✓ No | | | |
| | Yes. Do your lists include personally identif | fiable information (as defined in 11 U.S. | C 8 101(41A))? | |
| | I see 20 year nete metade percentany racina | | G. 3 . G. (, y _j) . | |
| | No | | | |
| | Yes. Describe | | | |
| | | | | |
| 44. | Any business-related property you did not a | Iready list | | |
| | ■ N: | | | |
| | ✓ No | | | |
| | Yes. Give specific | | | |
| | information | - | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 45. A | dd the dollar value of all of your entries from | Part 5, including any entries for page | ges you have attached | |
| for Pa | art 5. Write that number here | | | |
| <u></u> | D 1 4 5 10 | | | |
| Part | Describe Any Farm- and Commerce If you own or have an interest in farmland, list | | ou Own or Have an Interest In. | |
| | ii you own or have an interest in farmand, list | it iii Fait I. | | |
| 46. | Do you own or have any legal or equitable i | nterest in any farm- or commercial | fishing-related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | | | | portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims |
| 47 | Farma animala | | | or exemptions |
| 47. | Farm animals Examples: Livestock, poultry, farm-raised fish | | | |
| | Livestock, poultry, lattit-taised listi | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 19 of 69

| Debt | tor 1 Glenisha First Name | Middle Name | Owens Last Name | Case number (if known) | |
|--------------|---------------------------------|---|----------------------------|------------------------------|-------------|
| 48. | Crops-either gro | wing or harvested | | | |
| | ✓ No Yes. Describe | ··· | | | |
| 49. | Farm and fishing | equipment, implements, machinery, fixtu | res, and tools of trade | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing | supplies, chemicals, and feed | | | |
| | No Yes. Describe | | | | |
| 51. | | ommercial fishing-related property you dic | I not already list | | |
| | Yes. Describe | | | | |
| | | e of all of your entries from Part 6, includi umber here | ng any entries for pages y | you have attached | |
| Part 7 | 7: Describe A | ll Property You Own or Have an Inter | rest in That You Did No | ot List Above | |
| | Do you have oth | er property of any kind you did not already | | | |
| | | tickets, country club membership | | | |
| | ✓ No Yes. Give specinformation | cific | | | |
| | | | | | |
| 54. A | dd the dollar valu | e of all of your entries from Part 7. Write t | hat number here | | <u> </u> |
| | | | | | |
| | | | | | |
| Part 8 | 8: List the Tot | als of Each Part of this Form | | | |
| 55. F | Part 1: Total real | estate, line 2 | | > | |
| 56. p | oart 2 total vehicl | es, line 5 | \$7000.00 | | |
| 57. P | art 3: Total perso | nal and household items, line 15 | \$300.00 | | |
| 58. P | art 4: Total finan | cial assets, line 36 | \$10.00 | | |
| 59. F | Part 5: Total busii | ness-related property, line 45 | | | |
| 60. F | Part 6: Total farm | - and fishing-related property, line 52 | | | |
| 61. F | Part 7: Total othe | r property not listed, line 54 | | | |
| 62. T | Fotal personal pro | perty. Add lines 56 through 61 | *7310.00 | Copy personal property total | + \$7310.00 |
| 63. T | otal of all propert | y on Schedule A/B. Add line 55 + line 62 | | | \$7310.00 |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 20 of 69

| Fill in this infor | mation to identify your c | ase: | | |
|---------------------|---------------------------|-------------|----------------------|--|
| Debtor 1 | Glenisha | | Owens | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number | | | | |
| (If known) | | | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Clair | m as Exempt | | | | | |
|----|---|---|---|---|--|--|--|
| 1. | Which set of exemptions are you claim | ing? Check one only, ev | ven if your spouse is filing with you. | | | | |
| | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) | | | | | | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(| 2) | | | | |
| 2. | For any property you list on Schedule A | A/B that you claim as e | exempt, fill in the information below. | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | Brief description: Ford Escape, 2010, 2010 Ford Escape Line from Schedule A/B: 03 | \$7,000.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) | | | |
| | Brief | | | 735 ILCS 5/12-1001(b) | | | |
| | description: | \$10.00 | \$10.00 | | | | |
| | Cash on Hand Line from Schedule A/B:16 | | 100% of fair market value, up to any applicable statutory limit | _ | | | |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 21 of 69

| De | btor 1 Glenisha First Name Midd | lle Name | Owens Last Name | Case number (if known) | |
|-----|---|---|--------------------|--|------------------------------------|
| Pai | rt 2: Additional Page | ne ivame | Last Name | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Check only one | exemption you claim box for each exemption. | Specific laws that allow exemption |
| | Brief description: Cell Phone Line from Schedule A/B: 07 | \$100.00 | | \$100.00 air market value, up to any statutory limit | 735 ILCS 5/12-1001(b) |
| | Brief description: Used Clothing Line from Schedule A/B: 11 | \$200.00 | | \$200.00 air market value, up to any statutory limit | 735 ILCS 5/12-1001(a) |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 22 of 69

| | | DC | cument Page 22 or | 09 | | |
|---|--|--|--|---|---|------------------------------------|
| Fill in this info | rmation to identify your ca | se: | | | | |
| Debtor 1 | Glenisha First Name | Middle Name | Owens Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | | Northern | District of Illinois | | | |
| Case number | | | (State) | | | |
| | Form 106D | | | J | | Check if this is an amended filing |
| Schedi | ule D: Credite | ors Who Ha | ve Claims Secure | ed by Prop | erty | 12/15 |
| 1. Do any No. | se number (if known). creditors have claims se | ecured by your proper | nber the entries, and attach it to t | · | , , | es, write your |
| List all separat | · · · · = | nan one creditor has a par | cured claim, list the creditor ticular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| Creditor 2730 I Num PITTSE City Who or De De At an Ch | BURGH PA 15222 State ZIP Code wes the debt? Check one. bbtor 1 only bbtor 2 only bbtor 1 and Debtor 2 only least one of the debtors d another leck if this claim relates a community debt | 2010 Ford Escape As of the date you file Contingent Unliquidated Disputed Nature of lien. Check An agreement you car loan) | made (such as mortgage or secured a as tax lien, mechanic's lien) a lawsuit ight to offset) | \$12,415.00 | \$7,000.00 | <u>\$5,415.00</u> |
| Date d | ebt was <u>8/2017</u> ed | Last 4 digits of accou | nt number 5454 | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$12,415.00

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 23 of 69

| F-11 | | | | | |
|---------------------------------|---|---|---|--|---|
| Fill in th | nis information to identify your c | ase: | | | |
| Debtor | | | Owens | | |
| | First Name | Middle Name | Last Name | | |
| Debtor (Spouse, | = <u></u> | Middle None | Last Name | | |
| (Spouse, | rimig) First Name | Middle Name | Last Name | | |
| United | States Bankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | | |
| Case n | | | | | |
| ` ' | | | | | Check if this is an amended filing |
| OTTIC | ial Form 106E/F | | | L | |
| Sch | edule E/F: Cre | ditors Who | Have Unsec | ured Claims | 12/15 |
| other pa Form 10 claims t | arty to any executory contracts 16A/B) and on Schedule G: Exe that are listed in Schedule D: Cries in the boxes on the left. At | s or unexpired leases that cutory Contracts and Unex reditors Who Hold Claims | could result in a claim. Als xpired Leases (Official For Secured by Property. If mo | m 106G). Do not include any c ore space is needed, copy the | SNPRIORITY claims. List the Schedule A/B: Property (Official reditors with partially secured Part you need, fill it out, number your name and case number (if |
| Part 1: | EIST AIR OF TOUR THIOTHT | | | | |
| | o any creditors have priority un | | ou? | | |
| | | | ou? | | |
| | any creditors have priority un | | ou? | | |

Total

claim

Priority

amount

Nonpriority

amount

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 24 of 69

Debtor 1 Glenisha Owens Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 ACME CONTL CREDIT UNIO \$831.00 Last 4 digits of account number 2814 Nonpriority Creditor's Name When was the debt incurred? 9/2015 13601 S PERRY AVE Number As of the date you file, the claim is: Check all that apply. Contingent **RIVERDALE** Illinois 60827 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes ACME CONTL CREDIT UNIO 4.2 \$746.00 Last 4 digits of account number 0192 Nonpriority Creditor's Name 13601 S PERRY AVE When was the debt incurred? 1/2016 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated **RIVERDALE** Illinois 60827 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes CAPITAL ONE AUTO FINAN \$5,394.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8/2015 3901 DALLAS PKWY Number Street As of the date you file, the claim is: Check all that apply. Contingent **PLANO** Texas 75093 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 072 Automobile Is the claim subject to offset? Other. Specify _ No Yes

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 25 of 69

Debtor 1 Glenisha Guenisha Owens Case number (if known)
First Name Middle Name Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | on Page | |
|--------|--|--|-------------|
| | After listing any entries on this page, number them beginning v | with 4.5, followed by 4.6, and so forth. | Total claim |
| 4.4 | Christ Hospital Nonpriority Creditor's Name 2139 Aubum Ave Number Street Cincinnati Ohio 45219 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill | \$1,000.00 |
| 4.5 | City of Chicago - Parking and red Light Tickets Nonpriority Creditor's Name Department of Revenue - PO Box 88292 Number Street Chicago Illinois 60680 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number When was the debt incurred? | \$6,200.00 |
| 4.6 | Illinois Tollway Nonpriority Creditor's Name 2700 Ogden Ave Number Street Legal Dept Downers Grove Illinois 60515 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes | Last 4 digits of account number When was the debt incurred? | \$2,000.00 |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 26 of 69

Debtor 1 Glenisha Guenisha Owens Case number (if known)
First Name Middle Name Last Name

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuati | ion Page | | | | |
|--------|--|--|-------------|--|--|--|
| | After listing any entries on this page, number them beginning | with 4.5, followed by 4.6, and so forth. | Total claim | | | |
| 4.7 | Ingles Hospital | — Last 4 digits of account number | \$1,500.00 | | | |
| | Nonpriority Creditor's Name 1 Ingalls Drive | When was the debt incurred? n/a | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | — Contingent | | | | |
| | Harvey Illinois 60426 | Unliquidated | | | | |
| | City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | At least one of the debtors and another | | | | | |
| | Check if this claim relates to a community debt | Other. Specify Medical Bill | | | | |
| | Is the claim subject to offset? | | | | | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.8 | MCCARTHY BURGESS & WOL Nonpriority Creditor's Name | Last 4 digits of account number 0000 | \$391.00 | | | |
| | 1111 GATEWAY SVC PARK | When was the debt incurred? 8/2017 | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | MORRISTOWN Tennessee 37813 City State Zip Code | — Unliquidated | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Is the claim subject to offset? | 001 Collection; Collecting for ORIGINAL CREDITOR: | | | | |
| | ✓ No | COMMONWEALTH EDISON | | | | |
| | Yes | Other. Specify COMPANY AK | | | | |
| 4.9 | Midwest Title Loans | Last 4 digits of account number | \$1,100.00 | | | |
| | Nonpriority Creditor's Name 12047 Western Ave | When was the debt incurred? | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | |
| | | Contingent | | | | |
| | Physical Illinois 60406 | Unliquidated | | | | |
| | Blue Island Illinois 60406 City State Zip Code | Disputed | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | |
| | <u> </u> | Student loans | | | | |
| | Debtor 2 only | Obligations arising out of a separation agreement or | | | | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | At least one of the debtors and another | | | | | |
| | Check if this claim relates to a community debt | Other. Specify Title Loan | | | | |
| | Is the claim subject to offset? | | | | | |
| | | | | | | |
| | Yes | | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 27 of 69

Debtor 1 Glenisha Owens Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 SUNRISE CREDIT SERVICE \$430.00 Last 4 digits of account number Nonpriority Creditor's Name 234 AIRPORT PLAZA BLVD S When was the debt incurred? 6/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **FARMINGDALE** New York 11735 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: T-**✓** No Other. Specify MOBILE Yes 4.11 Thompson & Sons Auto Parts \$375.00 Last 4 digits of account number Nonpriority Creditor's Name 13744 S. Sacramento When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60472 Robbins Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Car Storage Fees (tow) Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.12 \$6,974.00 0274 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 9/2013 Number As of the date you file, the claim is: Check all that apply. Contingent 30301 ATLANTA Georgia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

✓ No Yes

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 28 of 69

Debtor 1 Glenisha Owens Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 U S DEPT OF ED/GSL/ATL \$3,764.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 9/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent **ATLANTA** Georgia 30301 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.14 U S DEPT OF ED/GSL/ATL \$3,733.00 Last 4 digits of account number 0270 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 8/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30301 Georgia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.15 \$2,299.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 8/2014 Number As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30301 Georgia Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset?

No Yes

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 29 of 69

Debtor 1 Glenisha Owens __ Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 USDOE/GLELSI \$0.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 8973 When was the debt incurred? 9/2013 Number Street As of the date you file, the claim is: Check all that apply. Attn: Mary Moua Contingent 53708 Madison Wisconsin Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 30 of 69

| Jeptor I | Gienisna | | | Owens | Case number (if known) | | | |
|----------------------|-------------------------------------|---|---|--|---|--|--|--|
| | First Name Middle Name | | Last Name | | | | | |
| art 3: | List Others to | Be Notified A | About a Debt Tha | t You Already Liste | ted | | | |
| coll coll cred | ection agency is ection agency h | s trying to colle ere. Similarly, i u do not have a | ct from you for a de f you have more tha | ebt you owe to some on one creditor for ar | y, for a debt that you already listed in Parts 1 or 2. For example, if a cone else, list the original creditor in Parts 1 or 2, then list the any of the debts that you listed in Parts 1 or 2, list the additional y debts in Parts 1 or 2, do not fill out or submit this page. | | | |
| Nam | ie | | | On which enti | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| 111 | 111 W JACKSON BLVD S-400 | | | Line 4.5 | of (Check Part 1: Creditors with Priority Unsecured Claims | | | |
| Nur | nber Street | | | | one): Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| CHI | CAGO | Illinois | 60604 | Last 4 digits o | of account number | | | |
| City | | State | Zip Code | | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 31 of 69

Debtor 1 Glenisha Owens Case number (if known)

| First Na | me Middle Name Last Name | | |
|--------------------------|---|-----|--|
| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | |
| 6. Total the a | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | | statistical reporting purposes only. 28 U.S.C. §159. Total claims |
| | | | Total Claims |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 |
| | 6b. Taxes and certain other debts you owe the government | | \$0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 |
| | 6e. Total. Add lines 6a through 6d. | | \$0.00 |
| | | | Total claims |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$16,770.00 |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$19,967.00 |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$36,737.00 |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 32 of 69

| Debtor 1 | Glenisha | | Owens |
|---------------------|---------------------------|-------------|----------------------|
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main

| | | 0000 10 00 | Do | ocument Page 3 | 33 of 69 |
|------------------|------------------------------------|---|---------------------------------|---|--|
| Fill in t | this infor | mation to identify you | ur case: | | |
| Debto | r 1 | Glenisha | | Owens | |
| | | First Name | Middle Name | Last Name | |
| Debto (Spouse | r 2 e, if filing) | First Name | Middle Name | Last Name | |
| United | I States E | Sankruptcy Court for the | ne: Northern | District of Illinois | |
| Case r | number | | | (State) | |
| (If know | | | | | |
| | | | | | Check if this is an amended filing |
| Offi | cial | Form 106h | 4 | | |
| | | | _ | | |
| Sch | edul | e H: Your C | odebtors | | 12/15 |
| 1. 2. | Do you No Ye Within t California | the last 8 years, have a, Idaho, Louisiana, No. Go to line 3. ss. Did your spouse, No Yes. In which com | levada, New Mexico, Puerto R | property state or territory? ico, Texas, Washington, and ivalent live with you at the t | ? (Community property states and territories include Arizona, d Wisconsin.) |
| | | | se, former spouse, or legal equ | nivalent | |
| | | Number Street | | | |
| | | City | State | Zip Code | le e |
| 3. | again a | s a codebtor only if | that person is a guarantor o | r cosigner. Make sure you | r if your spouse is filing with you. List the person shown in line 2 u have listed the creditor on Schedule D (Official Form 106D), shedule D, Schedule E/F, or Schedule G to fill out Column 2. |
| | Column | 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |
| | | | | | Check all schedules that apply: |

Dorsey, Ruth Schedule D, line Name Schedule E/F, line4.7 **✓** 16342 Evans Ave Number Street Schedule G, line South Holland City 60473 Illinois State Zip Code

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 34 of 69

| Fill in this information to ident | ity your case: | | | | |
|---|--|------------------------------|------------------|-------------------|---|
| Debtor 1 Glenisha | | Owens | | _ | |
| First Name | Middle Name | Last N | ame | Che | eck if this is: |
| Debtor 2 (Spouse, if filing) First Name | Middle Name | Last N | ame | - I п | An amended filing |
| | | | | | A supplement showing post-petition chapter 1 |
| United States Bankruptcy Court f the: | or <u>Northern</u> | _ District of Illi | inois State) | | expenses as of the following date: |
| Case number | | (0 | riato) | _ | |
| (lf known) | | | | | MM / DD / YYYY |
| Official Form 106I | | | | | |
| Schedule I: Your I | ncome | | | | 12/1 |
| information about your spous | e. If you are separated and ed, attach a separate she very question. | d your spous | se is not filing | with you, do | r spouse is living with you, include not include information about your ional pages, write your name and case |
| Fill in your employment | | Debtor 1 | | | Debtor 2 |
| information. | Employment status | ✓ Emplo | wod | | Employed |
| If you have more than one job, attach a separate page with | | | nployed | | Not Employed |
| information about additional | | Пиост | прюува | | Not Employed |
| employers. | Occupation | | | | |
| Include part time, seasonal, or | Employer's name | United States Postal Service | | ı | |
| self-employed work. | Employer's address | 1605 Bog | gs Rd | | |
| Occupation may include studer or homemaker, if it applies. | t | Number S | | | Number Street |
| | | | | | |
| | | Duluth City | Georgia State | 30096 Zip Code | City State Zip Code |
| | How long employed there? | | | | |
| Part 2: Give Details About | t Monthly Income | | | | |
| spouse unless you are separated | d. | • | | • | write \$0 in the space. Include your non-filing |
| If you or your non-filing spouse h more space, attach a separate s | | combine the | | | or that person on the lines below. If you need For Debtor 2 or |
| | | | For D | ebtor 1 | non-filing spouse |
| | salary, and commissions (befo hly, calculate what the monthly | | 2. | \$2,907.47 | |
| 3. Estimate and list monthly of | vertime pay. | | 3. | + \$0.00 | |
| 4. Calculate gross income. Ac | ld line 2 + line 3. | | 4. | \$2,907.47 | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 35 of 69

| Debtor 1Glenisha | Owens | Case number | | |
|--|-----------------------|-----------------------|-----------------------------------|---------------------|
| First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → 4. | \$2,907.47 | mon-ming spouse | |
| 5. List all payroll deductions: | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$615.75 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | · | |
| 5e. Insurance | 5e. | \$0.00 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | |
| 5g. Union dues | 5g. | \$0.00 | | |
| 5h. Other deductions. Specify: | | \$0.00 + | | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + +5h. | | \$615.75 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line | ne 4. 7. | \$2,291.73 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, ar the total monthly net income. | nd 8a. <u>.</u> | \$0.00 | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, o dependent regularly receive | or a | | | |
| Include alimony, spousal support, child support, maintenanc divorce settlement, and property settlement. | e, 8c. | \$0.00 | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | |
| 8e. Social Security | 8e. | \$0.00 | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benef under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | its 8f. | \$0.00 | | |
| 8g. Pension or retirement income | 8g. | \$0.00 | | |
| 8h. Other monthly income. Specify: | 8h. + | \$0.00 + | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | | \$0.00 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing | 10. spouse | \$2,291.73 + | = | \$2,291.73 |
| State all other regular contributions to the expenses that y Include contributions from an unmarried partner, members of you friends or relatives. Do not include any amounts already included in lines 2-10 or am | ur household, your d | ependents, your roomn | • | |
| Specify: | | | 11. | + \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical S | | | | \$2,291.73 Combined |
| 13. Do you expect an increase or decrease within the year afte | r you file this form? | | | monthly income |
| | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main

| | | Docu | ment Page 36 of 69 | | |
|---------------------------------|---|---|---|-------------------|---|
| Fill in this infor | mation to identify | your case: | | | |
| Debtor 1 | Glenisha First Name | Middle Name | Owens Last Name | Check if this is: | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended fili | ng |
| United States E | Bankruptcy Court fo | or the: Northern [| District of Illinois (State) | | howing post-petition chapter 13 the following date: |
| Case number (If known) | - | | | MM / DD / YYY | <u>Y</u> |
| Official | Form 106 | <u>5J</u> | | | |
| Schedul | e J: Your I | Expenses | | | 12/1: |
| information. If | | s possible. If two married people and the specified and the specified another sheet to this on. | | | |
| Part 1: Des | cribe Your Hou | sehold | | | |
| 1. Is this a joi | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. D | oes Debtor 2 live | in a separate household? | | | |
| | No | | | | |
| | Yes. Debtor 2 m | nust file Official Forms 106J-2, <i>Expen</i> | ses for Separate Household of Debt | or 2. | |
| 2. Do you hav | e dependents? | No | | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? No. |
| | | | Child | 1 year | Yes. |
| | penses include f people other | ✓ No | | | |
| yourself and dependents | - | Yes | | | |
| Part 2: Esti | mate Your Ong | oing Monthly Expenses | | | |
| | of a date after the | our bankruptcy filing date unless y bankruptcy is filed. If this is a sup | | | |
| | | non-cash government assistance in description in a schedule I: Your Income | | | Your expenses |
| | l or home ownersl or the ground or lot | hip expenses for your residence. In :. 4. | clude first mortgage payments and | | \$600.00 |
| If not incl | uded in line 4: | | | | |

4a

4b.

4c.

4d.

\$0.00

\$0.00

\$0.00

\$0.00

4a. Real estate taxes

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 37 of 69

 Debtor 1 First Name
 Glenisha
 Owens
 Case number (if known)

 Last Name
 Last Name

| 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: 6a. Electricity, heat, natural gas 6a. | Your expenses |
|---|---------------------------------------|
| 6. Utilities: | · · · · · · · · · · · · · · · · · · · |
| | |
| 6a. Electricity, heat, natural gas | |
| | \$150.00 |
| 6b. Water, sewer, garbage collection 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. | \$91.00 |
| 6d. Other. Specify: 6d | \$0.00 |
| 7. Food and housekeeping supplies 7. | \$450.00 |
| 8. Childcare and children's education costs 8. | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | \$60.00 |
| 10. Personal care products and services | \$80.00 |
| 11. Medical and dental expenses 11. | \$0.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | \$325.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | \$0.00 |
| 14. Charitable contributions and religious donations 14. | \$0.00 |
| 15. Insurance.Do not include insurance deducted from your pay or included in lines 4 or 20. | |
| 15a. Life insurance | \$0.00 |
| 15b. Health insurance | \$0.00 |
| 15c. Vehicle insurance | \$135.00 |
| 15d. Other insurance. Specify: 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | |
| Specify: | \$0.00 |
| 17. Installment or lease payments: | |
| 17a. Car payments for Vehicle 1 | \$0.00 |
| 17b. Car payments for Vehicle 2 | \$0.00 |
| 17c. Other. Specify: | \$0.00 |
| 17d. Other. Specify: 17d | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | |
| 19. Other payments you make to support others who do not live with you. Specify: 19. | # 0.00 |
| Specify: | \$0.00 |
| 20a. Mortgages on other property | \$0.00 |
| 20b. Real estate taxes. | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | \$0.00 |
| 20e. Homeowner's association or condominium dues | \$0.00 |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 38 of 69

| Debtor 1 Glenis | ha | | Owens | Case number (if known) | | |
|------------------------|--------------------------|----------------------------|--|------------------------|-----|------------|
| First N | ame | Middle Name | Last Name | | | _ |
| 21. Other. Spec | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calculate | your monthly expense | S. | | | | \$1,891.00 |
| 22a. Add lin | es 4 through 21. | | | | | \$0.00 |
| 22b. Copy I | ine 22 (monthly expens | ses for Debtor 2), if any, | from Official Form 106J-2 | 2 | | \$1,891.00 |
| 22c. Add lin | e 22a and 22b. The res | sult is your monthly exp | enses. | | 22. | |
| 23.Calculate | our monthly net inco | me. | | | | |
| 23a. Copy I | ne 12 (your combined | monthly income) from S | Schedule I. | | 23a | \$2,291.73 |
| 23b. Copy | our monthly expenses | from line 22 above. | | | 23b | \$1,891.00 |
| 23c. Subtra | ct your monthly expens | es from your monthly ir | icome. | | | \$400.73 |
| The re | sult is your monthly net | income. | | | 23c | |
| | eayment to increase or o | | pan within the year or do ynodification to the terms of t | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 39 of 69

| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Glenisha | | Owens | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | | (State) | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | nelp you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary | and schedules filed with this declaration and |
| | that they are true and correct. | |
| × | /s/ Glenisha Owens | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 2/7/2018 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 40 of 69

| Fill in this | information to identify yo | our case: | | | | | |
|---|----------------------------------|------------------------|--|-----------------|-------------|----------|----------------------|
| Debtor 1 | Glenisha | | Owens | | | | |
| Debtor 2 | First Name | Middle | Name Last Nam | ie | | | |
| (Spouse, if fil | ing) First Name | Middle | Name Last Nam | ie | - | | |
| United Sta | ates Bankruptcy Court for | the: Northern | District of Illino | | _ | | |
| Case num | ber | | (Stat | re) | | | |
| (If known) | | | | | | | Check if this is a |
| Officia | al Form 107 | | | | | | amended filing |
| Stater | ment of Finan | cial Affairs | for Individuals | Filing fo | r Bankru | intev | 04/1 |
| | | | narried people are filing | | | <u> </u> | |
| information | on. If more space is no | eded, attach a se | parate sheet to this form | | | | |
| number (r | f known). Answer eve | ry question. | | | | | |
| Part 1: | Give Details About Yo | our Marital Statu | s and Where You Lived | Before | | | |
| 1. Wha | at is your current marita | ıl status? | | | | | |
| | Married | | | | | | |
| Image: Control of the | Not married | | | | | | |
| 2. Dur | ing the last 3 years hav | e vou lived anywhe | re other than where you li | ve now? | | | |
| 2. Dui | | e you lived allywile | re other than where you if | ve now: | | | |
| 片 | No Ves List all of the place | es you lived in the la | st 3 years. Do not include v | where vou live | now | | |
| | roo. Elot all or the place | | ot o your of Do Flot include | Wiloro you iivo | | | |
| | Debtor 1: | | Dates Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | | | there | | | | there |
| | | | | Same a | as Debtor 1 | | Same as Debtor 1 |
| | 1421 Burnham Ave | | _ | | | | _ |
| | Number Street | | From | Number St | reet | | From |
| | | | To | - | | | To |
| | Calumet City Illinois City State | 60409 Zip Code | | City | State | Zip Code | |
| | | | | Same | as Debtor 1 | | Same as Debtor 1 |
| | | | | _ | | | _ |
| | Number Street | | From | Number St | reet | | From |
| | | | То | | | | To |
| | City State | Zip Code | | City | State | Zip Code | |
| | - | | | | | | |
| | | | spouse or legal equivalent isiana, Nevada, New Mexico | | | | |
| √ 1 | No | | | | | | |
| | | ut Schedule H: You | r Codebtors (Official Form | 106H). | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 41 of 69

Case number (if known)

Owens

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$1828.53 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$22599.73 For last calendar year: commissions, commissions, 2017 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$3000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2016) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Gross income from Sources of income Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2017 For the calendar year before that: (January 1 to December 31, 2016

Debtor 1 Glenisha

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 42 of 69

Debtor 1 Glenisha Owens __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 43 of 69

| ebtor 1 | Glenisha | | | Ow | ens | Case number | (if known) |
|---------------------|---|---|---|--|--|---|--|
| | First Name | | Middle Name | Last | Name | | |
| Insi corp age | ders include your porations of whic int, including one h as child suppor | relatives; and help you are and for a busin | ny general partners n officer, director, p ess you operate as | ; relatives of any operson in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing r domestic support obligations, |
| ✓ | No | | | | | | |
| Ш | Yes. List all pay | ments to a | ın ınsıder. | D | | | D (11) |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| insi | der? ude payments on No | debts gua | for bankruptcy, dranteed or cosigned benefited an insi | d by an insider. | payments or trans | fer any property o | n account of a debt that benefited an |
| ш | roo. Liot all pay | morro ara | | Dates of | Total amount | Amount you | Reason for this payment |
| | | | | payment | paid | still owe | Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 44 of 69

Debtor 1 Glenisha Owens Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished.

City

State

Zip Code

Property was attached, seized, or levied.

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 45 of 69

| Debto | r 1 Glen | | | Owens | Case number (if known) | | |
|--------|---------------|--|----------------------|----------------------------|---------------------------------|--------------------------|--------------------|
| | First | Name | Middle Name | Last Name | | | |
| | | 90 days before you filed for ts or refuse to make a pay | | | ank or financial institution, s | et off any amou | nts from your |
| | ✓ No ✓ Yes | s. Fill in the details. | | | | | |
| ' | | | | Describe the action the | creditor took | Date action was taken | Amount |
| | Cre | editor's Name | | | | | |
| | Nur | mber Street | | | | | |
| | | | | Last 4 digits of account n | number: XXXX- | | |
| 12 \ | City | | Zip Code | of your property in the | possession of an assignee for | the benefit of c | roditore a court- |
| | | ed receiver, a custodian, o | | of your property in the p | oossession of an assignee to | the benefit of C | reditors, a court- |
| [| ✓ No Yes | | | | | | |
| Part 5 | List | Certain Gifts and Cont | ributions | | | | |
| 13. | Within | 2 years before you filed for | r bankruptcy, did yc | u give any gifts with a to | otal value of more than \$600 | per person? | |
| | ✓ No | o es. Fill in the details for each | n gift. | | | | |
| | | ts with a total value of mor r person | re than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | 0.15 | | | | |
| | Pers | son to Whom You Gave the | Gift | | | | |
| | Nur | mber Street | | | | | |
| | City | | Zip Code | | | | |
| | Pers | son's relationship to you | | | | | |
| | Pers | son to Whom You Gave the | Gift | | | | |
| | Nur | mber Street | | | | | |
| | City | | Zip Code | | | | |
| | Pers | son's relationship to you | | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 46 of 69

| btor 1 | Glenisha | | Owens | Case number (if know | vn) | |
|--------|---|---|---|----------------------------|-----------------------------------|------------------------|
| | First Name | Middle Name | Last Name | | · | |
| | | | | | | |
| . Wit | thin 2 years before you filed for | bankruptcy, did | you give any gifts or contributio | ns with a total value | of more than \$600 | to any charity? |
| | l No | | | | | |
| ✓ | No | | | | | |
| | Yes. Fill in the details for each | gift or contribution | on. | | | |
| | Gifts or contributions to char | ritios | Describe what you contribu | tad | Date you | Value |
| | that total more than \$600 | ities | Describe what you contribu | teu | contributed | Value |
| | that total more than \$000 | | | | Continuated | |
| | | | | | | |
| | Charity's Name | | | | | |
| | - | | | | | |
| | | | | | | |
| | Number Street | | | | | |
| | Number Street | | | | | |
| | 011 | 7'- 01- | | | | |
| | City State | Zip Code | | | | |
| | List Contain Lance | | | | | |
| t o: | List Certain Losses | | | | | |
| | Yes. Fill in the details. Describe the property you los how the loss occurred | st and | Describe any insurance cou Include the amount that insur | ance has paid. List | Date of your loss | Value of property lost |
| | | | pending insurance claims on A/B: Property. | line 33 of <i>Schedule</i> | | |
| | | | A.B. I Toperty. | | | |
| | | | | | | |
| | | | | | | |
| Wit | out seeking bankruptcy or prep | pankruptcy, did ye paring a bankrupt | | | | anyone you consulte |
| . Wit | hin 1 year before you filed for b out seeking bankruptcy or prep | pankruptcy, did ye paring a bankrupt | | | | anyone you consulte |
| . Wit | hin 1 year before you filed for but seeking bankruptcy or prepude any attorneys, bankruptcy pe | pankruptcy, did ye paring a bankrupt | cy petition? | | | anyone you consulte |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy pe | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser | vices required in your b | ankruptcy. | |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy pe | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser Description and value of any | vices required in your b | pankruptcy. Date payment | Amount of |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy pe | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser | vices required in your b | Date payment or transfer | |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy pe No Yes. Fill in the details. | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser Description and value of any | vices required in your b | Date payment or transfer | Amount of |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | pankruptcy, did ye paring a bankrupt | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | pankruptcy, did yo paring a bankrupt etition preparers, or | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | pankruptcy, did yo paring a bankrupt etition preparers, or | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street Chicago Illinois City State Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street | pankruptcy, did yo paring a bankrupt etition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | hin 1 year before you filed for bout seeking bankruptcy or preplude any attorneys, bankruptcy per No No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street Chicago Illinois City State Chicago Illinois City State Email or website address Person Who Made the Payment Person Who Was Paid Number Street | coankruptcy, did yo paring a bankrupto stition preparers, or 60643 Zip Code | cy petition? credit counseling agencies for ser Description and value of any transferred | vices required in your b | Date payment or transfer was made | Amount of payment |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 47 of 69

| Debte | or 1 Glenis | | | Owens | Case number (if known | n) | |
|-------|-------------------------|--|-----------------------|--|----------------------------|--|---------------------------------|
| | First Na | ame | Middle Name | Last Name | | | |
| | help you | | s or to make payme | ou or anyone else acting on yo ents to your creditors? on line 16. | ur behalf pay or transfe | r any property to an | nyone who promised to |
| | √ No | | | | | | |
| | Yes. | Fill in the details. | | | | | |
| | | | | Description and value of ar transferred | ly property | Date payment or transfer was made | Amount of payment |
| | Perso | on Who Was Paid | | | | | |
| | Num | ber Street | | | | | |
| | City | State | Zip Code | | | | |
| | Include boand transform | ary course of your busi oth outright transfers and ers that you have already Fill in the details. | I transfers made as s | ecurity (such as the granting of a | security interest or mortg | age on your property |). Do not include gifts |
| | | i iii ii i ii o dotallo. | | Description and value of pr transferred | | ny property or eceived or debts pa e | Date id transfer was made |
| | Perso | on Who Received Transfe | er | | | | |
| | Num | ber Street | | | | | |
| | City Perso | State on's relationship to you | Zip Code | | | | |
| | Perso | on Who Received Transfe | er | | | | |
| | Num | ber Street | | | | | |
| | City Perso | State on's relationship to you | Zip Code | | | | |
| | beneficia | - | | you transfer any property to a | self-settled trust or sin | nilar device of whic | h you are a |
| | ✓ No | · | , | | | | |
| | Yes. | Fill in the details. | | Description and value of t | ho proporty transforms | | Date |
| | | | | Description and value of t | ne property transferred | | transfer was made |
| | Nam | e of trust | | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 48 of 69

Debtor 1 Glenisha Owens Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred TCF Checking XXXX-\$ 0.00 Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number

City

State

State

Zip Code

City

Zip Code

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 49 of 69

Owens Debtor 1 Glenisha Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 50 of 69

| Debt | | Glenisha | | | Owens | Case | number <i>(if</i> | known) | |
|------|------|---|---|---|---|---|-------------------|---|----------------------|
| | | First Name | Middle Name | | Last Name | | | | |
| 26. | _ | | in any judicial or admii | nistrative | e proceeding under | any environment | tal law? In | clude settlements and ord | ers. |
| | | No Yes. Fill in the det | ails. | | | | | | |
| | | Occasibilis | | Cou | rt or agency | | Nature o | of the case | Status of the case |
| | | Case title | | Cour | rt Name | | | | Pending |
| | | Case number | | Num | nberStreet | | | | On appeal Concluded |
| | | _ | | City | State | Zip Code | | | Controladed |
| Part | 11: | Give Details Ab | out Your Business of | r Conne | ections to Any Bu | siness | | | |
| 27. | With | A sole proprious A member of A partner in a An officer, dir An owner of a No. None of the a | etor or self-employed in a limited liability compar | a trade, ny (LLC) cutive of or equity t 12. | profession, or other or limited liability partial a corporation y securities of a corp | r activity, either fu artnership (LLP) poration | _ | onnections to any busines: part-time | s? |
| | | | 113 | | Describe the nati | | ss | Employer Identification include Social Security r | |
| | | Business Name | | | | | | EIN: | |
| | | Number Street | Chata 7ia Cada | | Name of account | ant or bookkeepe | er | Dates business existed | |
| | | City | State Zip Code | ; | | | | From To | |
| | | | | | Describe the nati | ure of the busines | ss | Employer Identification include Social Security r | |
| | | Business Name | | | | | | EIN: | |
| | | Number Street | | | Name of account | ant or bookkeepe | er | Dates business existed | |
| | | City | State Zip Code |) | | | | From To | |
| | | | | | Describe the nati | ure of the busines | ss | Employer Identification include Social Security r | |
| | | Business Name | | | | | | EIN: | |
| | | Number Street | | | Name of account | ant or bookkeepe | er | Dates business existed | |
| | | City | State Zip Code |) | | | | From To | |
| | | | | | | | | | |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 51 of 69

| Deb | otor 1 Glenisha | | Owens | Case number (if known) |
|------|---------------------------------|------------------------|-------------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. | creditors, or other parties. | | ou give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | Yes. Fill in the details below | V. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Name | | , 22, | |
| | Number Street | | _ | |
| | | | _ | |
| | City State | Zip Code | | |
| Pari | t 12: Sign Below | | | |
| | | fines up to \$250,000, | , | ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature of Deb | | | Signature of Debtor 2 |
| | | | | Date |
| | Date 2/7/2018 | | | |
| ı | Did you attach additional pages | to Your Statement of | Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
| | No | | | |
| i | Yes | | | |
| ı | Did you pay or agree to pay som | eone who is not an at | torney to help you fill out b | ankruptcy forms? |
| | ✓ No | | | |
| i | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 52 of 69

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Di | strict of Illinois | | |
|----------|---|----------------------------|--------------------------------|------------------------|--------------------|
| In re | Glenisha Owens | | Case | No | |
| | Debtor | | | , | f known) |
| | | | Chapt | er Ch | napter 13 |
| | DISCLOSURE OF | COMPENSAT | ION OF ATTOR | NEY FOR DI | EBTOR |
| con | suant to 11 U.S.C. § 329(a) and l npensation paid to me within one dered or to be rendered on behal | year before the filing of | the petition in bankruptcy, o | r agreed to be paid to | o me, for services |
| For | legal services, I have agreed to a | ccept | | | \$4,000.00 |
| Pric | or to the filing of this statement I | have received | | | \$350.00 |
| Bala | ance Due | | | | \$3,650.00 |
| 2. The | e source of the compensation pai | d to me was: | | | |
| | ✓ Debtor | Other (spe | cify) | | |
| 3. The | source of the compensation pai | d to me is: | | | |
| | ✓ Debtor | Other (spe | cify) | | |
| 4. | I have not agreed to share the al members and associates of my | | ation with any other person | unless they are | |
| | I have agreed to share the above members or associates of my la the people sharing in the compe | w firm. A copy of the agre | | | |
| 5. In re | eturn for the above-disclosed fee a. Analysis of the debtor's finar bankruptcy; | - | · · | • • | _ |
| | b. Preparation and filing of any | petition, schedules, state | ements of affairs and plan wh | nich may be required | ! ; |
| | c. Representation of the debtor | at the meeting of creditor | ors and confirmation hearing | , and any adjourned | hearings thereof; |
| | d. Representation of the debtor | in adversary proceeding | s and other contested bankr | uptcy matters; | |
| 6. By a | agreement with the debtor(s), the | above-disclosed fee doe | es not include the following s | services: | |
| | | | | | |
| | | CERT | FICATION | | |
| | ify that the foregoing is a comple in this bankruptcy proceedings. | te statement of any agree | ement or arrangement for pay | ment to me for repre | esentation of the |
| | 2/7/2018 | | /s/ Alicia Har | 0 | |
| | Date | | Signature of Attor | mey | |
| | | | Semrad Law Fir | m | |
| | | | Name of law fir | m | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury - either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 57 of 69

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Owens, Glenisha | Case No | |
|-----------------|-----------------|--|--------------------------------------|
| | Debtor(s) | | |
| | | Chapter. | Chapter13 |
| | VERIFIC | CATION OF CREDITOR MAT | ΓRIX |
| Th knowledge | | y that the attached list of creditors is to | rue and correct to the best of their |
| Date: | 2/7/2018 | /s/ Owens, Gler Owens, Glenish Signature of De | a |

CNAC SH INC/JDB 2730 LIBERTY AVE PITTSBURGH, PA, 15222

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

CAPITAL ONE AUTO FINAN 3901 DALLAS PKWY PLANO, TX, 75093

ACME CONTL CREDIT UNIO 13601 S PERRY AVE RIVERDALE, IL, 60827

SUNRISE CREDIT SERVICE 234 AIRPORT PLAZA BLVD S FARMINGDALE, NY, 11735

MCCARTHY BURGESS & WOL 1111 GATEWAY SVC PARK MORRISTOWN, TN, 37813

USDOE/GLELSI PO Box 8973 Attn: Mary Moua Madison, WI, 53708

Illinois Tollway PO Box 5544 Chicago, IL, 60680

Ingles Hospital 1 Ingalls Drive Harvey, IL, 60426

Christ Hospital 4400 W 95th St Oak Lawn, IL, 60453

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602 HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Midwest Title Loans 2941 W 159th St Markham, IL, 60428

Thompson & Sons Auto Parts 13744 S. Sacramento Robbins, IL, 60472

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.



Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 61 of 69

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 62 of 69

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 1/30/2018 | |
|------------|--|--------------------------------|
| Signed: | | |
| /s/ Gleni: | sha Owens # # CM / | (c/Alicia Haro A Dicia - Hano) |
| | 1.1111111111111111111111111111111111111 | /s/ Alicia Haro WWCa 11am |
| Debtor(s) |) | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 65 of 69

| Debtor 1 Glenisha First Name | Middle Name | Owens Last Name | Case number (if known) | |
|--|--|--|---|---|
| | | | | |
| 16. What kind of debts do you have? 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative | expenses are paid that the No. | y consumer debts? Cal primarily for a person y business debts? Businvestment or through ou owe that are not contact or 7. Go to line 18. | nal, family, or household siness debts are debts the the operation of the bu nsumer debts or busine | d purpose." nat you incurred to obtain siness or investment. ss debts. |
| expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,00 10,001-25,0 | DO 🛅 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$50,000,00 | -\$10 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$50,000,001 | -\$10 million 1-\$50 million 1-\$100 million 01-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| | I have examined this petition, ar correct. If I have chosen to file under Ch of title 11, United States Code. I under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance wit I understand making a false state connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 1 | napter 7, I am aware that I understand the relief of I did not pay or agreemed and read the notice the chapter of title 1 ement, concealing propase can result in fines under the chapter of the second that in fines under the chapter of the second that in fines under the chapter of the chapte | at I may proceed, if eligit available under each ch to pay someone who is e required by 11 U.S.C. 1, United States Code, perty, or obtaining mon | ole, under Chapter 7, 11,12, or 13 apter, and I choose to proceed in not an attorney to help me fill § 342(b). specified in this petition. ey or property by fraud in isonment for up to 20 years, or |
| | Executed on 1/30/2018 MM / DD | / | Executed on | MM / DD / YYYY |



Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 66 of 69

| Fill in this infor | mation to identify your c | ase: | | |
|----------------------------|---------------------------|---------------------------|-----------------------|----------------------|
| Debtor 1 | Glenisha | | Owens | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number (If known) | | | | |
| Official | Form 106De | :C | | |
| Declarati | ion About an | Individual Deb | tor's Sched | lules |
| f two married _l | people are filing togeth | er, both are equally resp | onsible for supplying | correct information. |

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | Sign Below | | | | |
|-----|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | |
| | ☑ No | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | |
| | | | | | |
| | | | | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and | | | |
| × | /s/ Glenisha Owens | × | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | |
| | Date 1/30/2018 | Date | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | |

Check if this is an amended filing

12/15

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 67 of 69

| Debtor 1 | Glenisha | The Control of the Co | Owens | Case number (if known) |
|----------|---|--|----------------------------------|---|
| | First Name | Middle Name | Last Name | |
| | thin 2 years befor editors, or other p | | d you give a financial stateme | nt to anyone about your business? Include all financial institutions |
| ₹ | No Yes. Fill in the d | etails below. | | |
| | - | | Date issued | |
| | Name | | MM/DD/YYYY | |
| | Number Street | | | |
| | City | State Zip Code | | |
| Part 12: | Sign Below | | | |
| | nkruptcy case ca | n result in fines up to \$250,00 | | ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signa | ture of Debtor 1 | | Signature of Debtor 2 |
| | Date | 1/30/2018 | | Date |
| | No Yes | , - | of Financial Affairs for Individ | uals Filing for Bankruptcy (Official Form 107)? ankruptcy forms? |
| | No | | | |
| Ħ, | Yes. Name of perso | en | | Attach the Bankruptcy Petition Preparer's Notice, |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 68 of 69

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Owens, Glenisha | Case No | |
|-----------------|--|--|------------------------------------|
| | Debtor(s) | Case NO. | |
| | | Chapter. | Chapter13 |
| | VERIFICA | TION OF CREDITOR MAT | RIX |
| Th knowledge | e above named Debtors hereby verify th | at the attached list of creditors is tru | e and correct to the best of their |
| Date: | 1/30/2018 | /s/ Owens, Glenis | ha Blulle OD |
| | | Owens, Glenisha Signature of Debt | or |

Case 18-03440 Doc 1 Filed 02/07/18 Entered 02/07/18 15:38:13 Desc Main Document Page 69 of 69

| Debt | | lenisha irst Name | Middle Name | Owens Last Name | Case number (if known) | g project the distribution to the desired in the CD is a transferred public projection to the CD is a transferred public projection to the CD is a transferred public public projection to the CD is a transferred public p |
|--------|-------------------|---|---|---|--|--|
| 16 | | *************************************** | | · | | |
| 10. | galas, . | 원 Production () Page 1944 | n family income that applies t | | PS************************************ | |
| | | Fill in the state in | | Illinois | | د دین روید ویین مین ویژوی د قامت کا مسائلگاه محمد علی کا انتاب ا |
| | | | r of people in your household. | 2 | <u>-</u> | |
| | | household | family income for your state and sciffed in the separate instruction | To fi | ind a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office. | \$67,254.00 |
| 17. | | do the lines con | | | , | |
| | 17a. | Line 15b is le | ess than or equal to line 16c. On S.C. <i>§ 1325(b)(3).</i> Go to Part 3 . | the top of page 1 of the Do NOT fill out <i>Calcula</i> | nis form, check box 1, <i>Disposable income is not determined ation of Disposable Income</i> (Official Form 122C-2). | |
| | 17b. | U.S.C. § 132 | nore than line 16c. On the top o ?5(b)(3). Go to Part 3 and fill o our current monthly income fror | ut Calculation of Disp | heck box 2, Disposable income is determined under 11 osable Income (Official Form 122C-2). On line 39 of that | |
| Part : | 3: C | alculate Your | Commitment Period Unde | er 11 U.S.C. §1325(| (b)(4) | |
| 18. | Сору | your total avera | ge monthly income from line | 11. | | \$319.22 |
| 19. | Dedu comn | ict the marital ac nitment period un | djustment if it applies. If you a der 11 U.S.C. § 1325(b)(4) allov | are married, your spouse vs you to deduct part o | e is not filing with you, and you contend that calculating the f your spouse's income, copy the amount from line 13. | |
| | 19a. | If the marital adjus | stment does not apply, fill in 0 o | n line 19a. | | -\$0.00 |
| | 19b. : | Subtract line 19a | a from line 18. | | | \$319.22 |
| 20. | Calcu | ulate your curren | nt monthly income for the yea | r. Follow these steps: | | |
| | 20a. (| Copy line 19b. | | ************* | | \$319.22 |
| | 1 | Multiply by 12 (the | e number of months in a year). | | | x 12 |
| | 20b. ⁻ | The result is your | current monthly income for the | year for this part of the | fom. | \$3,830.64 |
| | 20c. (| Copy the median | family income for your state and | size of household from | n line 16c. | \$67,254.00 |
| 21. | How o | do the lines com | pare? | | | |
| | | | an line 20c. Unless otherwise ord is 3 years. Go to Part 4. | dered by the court, on t | the top of page 1 of this form, check box 3, The | |
| | | | nan or equal to line 20c. Unless at period is 5 years. Go to Part 4 | | ne court, on the top of page 1 of this form, check box | |
| Part 4 | : Si | gn Below | | | | |
| | | y signing here, I d /s/ Glenisha Signature of De | Owens L | | this statement and in any attachments is true and correct. Signature of Debtor 2 | |
| | | Date 2/7/2016 MM/DD/ | | | Date | |
| | lf : | • | do NOT fill out or file Form 122, fill out Form 122C-2 and file it | | 39 of that form, copy your current monthly income from line | 1 14 - |